

Youth Sport Coach Application

Completion of this form does not guarantee a Coaching position will be available.
Placement of Coaches will be made by the Parks & Recreation Staff based on the number of Teams registered.



Name: _____

Address: _____

City _____ Zip _____

Email: _____
(Required)

Telephone: (Home) _____

(Work) _____ Ext. _____

(Cell) _____

☐

I authorize my cell phone number being given to GwdToday.com to receive text messages regarding Parks & Recreation information. (Rain outs, make up games, meetings, etc...)

TWO COACHES PER TEAM (ONE HEAD AND ONE ASSISTANT)

League: _____

Do you want to be the Head Coach? yes no

Who will assist you? _____

Do you want to be an Assistant Coach? yes no

Who will you assist? _____
(you must have notified head coach)

Childs Name: _____

Son _____ Daughter _____ Step-Child _____

Other _____ Explain: _____

Childs Name: _____

Son _____ Daughter _____ Step-Child _____

Other _____ Explain: _____

Do you have any Coaching Experience? yes no

If yes – where? _____

Did you Coach Kids? yes no

(Please complete the information on the back of this form)

I certify that as a volunteer coach:

1. I have no criminal convictions.
 2. I will place the well-being of my players ahead of my personal desire to win.
 3. I will do my best to provide a safe playing situation.
 4. I will lead, by example, in demonstrating fair play and good sportsmanship to all players, officials and coaches.
 5. I will be sure that I am knowledgeable of the rules of the game and will teach them to my players.
 6. I will remember that I am a YOUTH coach and that the game is for the children and not the adults.
-

I hereby authorize and request the Greenwood County Parks and Recreation Department, Greenwood, South Carolina to obtain any police records, including the records of arrest, police reports, accident reports and records of convictions including both misdemeanors and felonies, for the purpose of coaching youth sports.

I understand that the giving of this authorization and Release of Information is a condition of volunteering to coach and any applicant who does not execute this release shall not be allowed to coach a youth team.

In consideration of such disclosure on the part of the above named persons or institutions I hereby release them from all and any liability arising therefrom and do relinquish and waive any claim or right I might have against them arising from such disclosure and copying.

My signature below certifies that all of the information on this application is accurate and that I agree to its terms.

(Signature)

(Date)

Social Security # (required) _____

Drivers License # (required) _____